Office of Sen. Lamar Alexander Internship Information Form

Please fax this form and a copy of your resume to (202) 228-3398.

Please note that all internships are unpaid.

Name:	Social Security #:
Home town:	University:
Phone:	Expected Year of Graduation
G.P.A.: Major:	Minor:
How will this experience fit into your ed	lucational plans?
Dates Applying to work (Mark all possib	ole):
SEMESTER INTERNSHIP DATES:	
Spring 2005: January 10, 2005	5 – May 6, 2005
Fall 2005: August 22, 2005 –	December 2, 2005
2005 SUMMER INTERNSHIP DATES	:
Session I: May 9, 2005 – June	e 24, 2005
Session II: June 27, 2005 – Au	ugust 5, 2005
•	situations, and we make every effort to rotate interns not guarantee certain assignments. Your return of this participate in any job assigned.
Please rank your top 3 preferences for in	tern job assignments.
Reception/ General Admi	nistrative Mail/ Correspondence
Constituent Services, Tou	rrs Press Office
Subcommittee on Childre	en and Families, General Reception & Administrative

Please provide contact information for three personal or professional references:	
Please describe why you want to be an intern specifically for Sen. Alexander and what you hope to accomplish.	
List/ describe any special skills that may not be apparent from your resume.	
Because of delays associated with Senate regulations on mail please FAX this application (ATTN: Jennifer Moroney) and resume to (202) 228-3398.	